Rama Varmha Tampuran (*Comptroller of Finance and Accounts*): Sir, I propose that the bill be taken up and passed to-morrow.

The motion was put and carried.

GOVERNMENT RESOLUTION.

Charging well-to-do patients attending medical institutions.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Sir, I rise to move the following resolution for the acceptance of the House :—

"*This Council recommends to Government that well-to-do patients attending the medical institutions for treatment may be charged for such treatment and that the scale of charges may be according to the income of patients.*"

Mr. P. J. George (*Joint Secretary to Government*): I second it.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Sir, in moving this resolution on the floor of this House, I do not think that I am called upon to make a long speech so that the hon'ble members here may decide on the question, because the general principles on which this resolution is being moved to-day are, I am sure, acceptable to one and all for the simple reason that it is not the intention of the Government to charge the poor and it is the intention of the Government to see that well-to-do people do not over-crowd our hospitals and thus deprive the poor of what is legitimately their due. It is a well-known fact that hospitals are charitable institutions and especially in the West, well-to-do men always consider it as a shame to deprive the poor of the accommodation in the hospitals and this sense of self-respect compels them to resort to what are known as nursing homes intended for catering to the needs of the special class of people, with the result that nursing homes of special type are evolved. There are nursing homes which are well-equipped where payments are made on a very large scale. There are middle-class nursing homes and there are a lower class also, and patients can go to nursing homes that suit their purses. At the same time it does not mean that the poorer man is deprived of the best medical aid nor is the well-to-do man deprived of it, because the hospitals are staffed with the very best and skilful of medical men. Similarly we will find that professional men of repute attach themselves not only to one type of nursing home, but that they are attached to the different types according to their skill. This subject is not new. It was tackled soon after my return from England in 1916. The then Diwan,

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now Sir Joseph Bhore was addressed on this topic and in the year 1918 he passed orders to the effect that the system should be brought into force at least in some of the major hospitals. Soon afterwards, the depression which was post-war came. It could not be given effect to, and one thing or other stood in the way.

Recently at the Retrenchment Committee, Dr. A. R. Menon with his characteristic forcefulness brought forward, this topic to be considered again. But even here, Government did not want to force the issue, but wanted to know what the representatives of the people of the State thought over the subject and it is with the hope that they will give their dispassionate consideration to this subject that I have tabled this resolution. I believe it is very rare that Government resolutions have been moved on the floor of this House and perhaps, if I remember right, this may be the second resolution that is ever tabled by Government, the other being moved by my hon'ble friend the Director of Public Instruction. I hope every member will view the points raised in this resolution dispassionately and take decisive steps to permit the Government to carry out the intention which is well-merited in the interests of the poor, and also to help the medical institutions whose running expenditure has been growing rapidly. This has been brought before the House several times by Dr. A. R. Menon.

Once more for the information of the House I may state that the expenditure under Medical Department has been mounting up very rapidly year after year and that the total expenditure under Medical and Sanitary Departments which stood at about Rs. 70,000 a few years ago is to-day standing at 5½ lakhs for Medical Department alone. I may, for the information, of the House, state that charging well-to-do patients in the Government Institutions is not a new thing here, in fact, it is prevalent in other parts of India. Coming to Madras Presidency, this system of charging well-to-do patients has been in vogue for nearly 20 years.

The States of Baroda, Mysore and Travancore have all adopted this system. And in Travancore they intend going further. The Durbar Physician of Travancore in one of his communications wrote to me that they intend to have fresh legislation there to increase the scale of charges that are now existing in other parts of India. As Government asked me to frame different grades of fees I looked into the matter and studied the question deeply. I got information from Madras, Mysore, Baroda and other parts of India and we have modified the rates to a lower standard than what is in vogue there. I may for the information of the House state that already there is a system of

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charging for some of the services in this State also, for instance, when the X-Ray Department was started, the system of charging was started here. Similarly when we started the bacteriological laboratory in Ernakulam, we started charging for that also. At present in the General Hospital at Ernakulam we charge a small fee as room rent in the Pay-Ward alone. But considering the expenditure Government has to meet for maintaining the several institutions in the State, and unlike in other States where there are charitable institutions maintained by private bodies in Cochin there is not a single institution which is maintained by anyone else except by Government. Under these circumstances, I think, the time has come when everyone interested in the welfare of the poor has to see how best we can serve the suffering population of the State by rich people coming to the aid of the poor by contributing to a certain extent a little of what they can. Now that they do not do it willingly, Government intend starting this Scheme of levying a small fee. I may for the information of this House, again state that money that will be collected in this way will be set apart for the improvement of the medical institutions of the State and as every member of this House is fully aware, the cry has been heard from every institution for greater facilities in the institutions existing, for more institutions where there are no institutions, and also for improving of the institutions—where the dispensaries are existing that they be converted into hospitals, where rural dispensaries are existing that they want them to be converted into hospitals, where there are no rural dispensaries within a radius of 10 miles that one rural dispensary be started and so on. Government find it very difficult to find funds. During question time to-day happily for me (because there were several supplementary questions) the time allowed for questions was not enough to reach the question by the member for Nalleppilly. That member put a question why his village was not given a hospital. Government had already ordered a sum of Rs. 500 for 1114 to start a rural dispensary at Nalleppilly, but when the budget was framed, it was not possible for the Government to see that this Rs. 500 was allotted for it. It was not possible in spite of the good intentions of the Government.

In the same way the active member for Kunnamkulam has this time asked for several rural dispensaries in his constituency such as Mundoor and somewhere at Kattakampal, at Erumapetty and another between Vadakkancheri and Kunnamkulam. This demand is everyday on the increase. I dare say that the people of the locality do deserve this. But the difficulty is to find funds. Therefore if a resolution like this is carried into effect and if we are in a position to make some revenue—

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Mr. K. Ayyappan (*Ezhuvas-Kanayannur*): What will be the probable revenue from this levy?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): We cannot say now. This is a source of revenue.

Mr. K. Ayyappan (*Ezhuvas-Kanayannur*): Have you made any enquiry?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): I am positive that it will be a few thousands and if carried on in a nice and sympathetic way, I am sure, the revenue will mount up to a greater extent. We will in the long run be in a position to solve our difficulties for starting new dispensaries. As long as this amount does not go to the general revenue and is to be set apart for starting new dispensaries and to improve the existing ones, I think it is decidedly the time when every member should necessarily be sympathetic and pass it without any dissentient voice.

I do not think I have been called upon for making a long speech, because what is best for the poor suffering people of the State, is in your mind as well as mine. With these few words, I move this resolution for the unanimous acceptance of this House.

Mr. T. A. Ramachandra Ayyar (*Nellayi*): Why are the highly paid officers exempted from this?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): This is a very pertinent question. If I have the power I would say Government Officers should also be charged. I do not fight shy of the proposition. But it has been customary for the Government which maintains all the institutions to have its own servants treated free of charge.

Mr. T. V. Subramania Ayyar (*Nemmara*): The Madras Government does not charge for out-patients.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): But there are other Governments who charge for out-patients also.

Mr. M. K. Devassy (*Adur*): May I know, Sir, the position of the Government in this matter, whether they would be amenable to bring the Government servants also under this?

Mr. P. Govinda Menon (*Mulakunnathukavu*): Will you allow us to move an amendment like this: "This Council recommends to the Government that well-to-do patients including Government Officers" so that it will be impossible for the Government to frame rules against the wishes of this Council. With your leave we propose that amendment.

Mr. C. R. Iyyunni (*Trichur-South*): On a point of information, may I know, whether 'members of the suling family' will

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include only Princes and Princesses or their wives and children.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Princes and Princesses alone.

Mr. C. R. Iyyunni (*Trichur South*): In that case, the resolution may have to be modified a little bit, because there is the definition of the 'family' given here. Under the definition 'family' means 'the father, mother, brothers, sisters, wife and children including the adopted son, etc.' Of course it would be best, for the rules that are to be hereafter drafted to make the necessary change. Under the present rules, the ruling family means the members and their wives and children. I want to make it clear that only Princes and Princesses should be included in the category of people who are to be exempted from this taxation.

Mr. Deputy President: Before we discuss this resolution, it is better that the amendments are also moved so that we can have the discussion on both together.

Mrs. Thankamma N. Menon (*Ernakulam-Women*): My amendment is to add 'net' before the word 'income'. I find from the copy of the rules supplied to us that a person would be charged according to his actual income. Rule 2 in Appendix A says that in the case of officials and other persons on monthly pay, the charges will be calculated on the actual salary drawn during the period of treatment in the hospital. In the other cases the charges will be calculated on the average income received during the 12 months preceding admission into the hospital by the patient or by the head of the family.

Of course it is rather very difficult to find out the exact net income of a family. I only want the Chief Medical Officer to consider the size of the family of the person before he fixes the rate for medical treatment. For instance, take the case of a bachelor who will be drawing about Rs. 1,200 per annum and compare it with the lot of a married person whose income is also the same. The bachelor will have only to meet his own expense whereas the married man has to maintain a very large family consisting of his wife and half-a-dozen children if not more. Is it fair and reasonable to charge both these persons at the same rate according to their income alone? So if this amendment is not accepted by the Chief Medical Officer, I am afraid that the Government will be doing a very great injustice to married people as a whole. So I hope the Chief Medical Officer will find his way to accept this amendment or at least give us an assurance that he will bear this point in view when he fixes the rate for medical treatment.

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Mr. Deputy President: There is another amendment by Mr. P. K. Madhava Menon.

Mr. K. Ayyappan (*Ezhuvas-Kanayannur*): The Appendix does not form part of the resolution. We have got a resolution before us laying down the principle in general. Does this Appendix form part of the resolution?

Mr. K. P. Kannan Nayar (*Secretary to Government*): No.

Mr. K. Ayyappan (*Ezhuvas-Kanayannur*): Then there is no room for the amendment.

Mr. K. Kochukunhan Kaimal (*Vadakkancheri*): Under what authority are these rules passed?

Mr. K. P. Kannan Nayar (*Secretary to Government*): They have not been passed.

Mr. Deputy President: There is only the resolution that is before the Council. The rules are not before the Council. The amendments are to the resolution and not to the rules. In the resolution fees are to be charged, according to the income of the patients. But, according to the amendment, the fees are to be charged on the net income.

On the amendment of Mr. P. K. Madhava Menon, I would like to hear the Advocate-General's view on the question of admissibility of that amendment.

Mr. C. A. Kunjunni Raja (*Advocate-General*): I shall read the resolution first. "This Council recommends to Government that well-to-do patients attending the Medical Institutions for treatment may be charged for such treatment." That is one thing contemplated by the resolution. The other is that the scale of charges may be according to the income of patients. These are the two subjects covered by the resolution and we can ignore all the notes printed and circulated. They have been placed there only for the information of the hon'ble members and will not form part of the resolution. The amendment proposed is that medical officers are strictly prohibited from receiving any remuneration from patients attending such institutions for treatment. This is not at all contemplated by the resolution. According to me this part of the amendment is going beyond the scope of the resolution under Standing Order 24. S. O. 24 reads thus: "An amendment must be relevant to, and within the scope of, the subject matter of the clause or motion to which it relates". The third part of the amendment is beyond the scope of the resolution and it is not in order. Therefore my view is that the last clause cannot be allowed to be moved.

Mr. Deputy President: It appears that the third part of

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the amendment is in itself a separate resolution and therefore it is out of order and cannot be allowed.

Mr. M. K. Devassy (*Adur*): Sir, I had sent in an amendment.

Mr. Deputy President: When did you give notice of this amendment?

Mr. M. K. Devassy (*Adur*): This morning.

Mr. P. Govinda Menon (*Mulakunnathukavu*): Sir, in regard to this matter one submission to be made is this. It is not contended that the amendment sent in by Mr. Devassy is in time. It has been the practice and the precedent of this House that in proper cases, if the Chair so deems it, amendments introduced on the floor of the House at the time when the resolutions are taken up, are allowed to be discussed.

Mr. Deputy President: But notice of this resolution has been sent long ago.

Mr. P. Govinda Menon (*Mulakunnathukavu*): That is so. But we have to make one point clear. The rules that have been supplied with the resolution are intended most probably because the members of the House should understand how the resolution is going to be worked. We have to make it clear that with these rules we are not prepared to support the resolution. Therefore we would submit that either Mr. Devassy's amendment should be allowed or the Chair may be pleased to allow me to move another amendment to the resolution (*Laughter*).

Mr. K. Ayyappan (*Ezhuvas-Kanayannur*): Because you are an older member.

Mr. P. Govinda Menon (*Mulakunnathukavu*): Being an older member and also for the purpose of understanding and appreciating the resolution properly this amendment would be necessary. An explanation may be appended to the resolution indicating the definition of a well-to-do person. This House, at least some of us, are not prepared to exempt well-to-do Government servants from the operation of this rule.

I will make one more submission. We admit the resolution was tabled long ago and that we have ample notice. We have come to the House with the impression that these rules form part of the resolution. Otherwise I do not understand why these rules were sent to us. It is these rules which made the confusion.

Mr. Deputy President: In spite of the shortness of notice I propose to allow Mr. Devassy to move his amendment.

Mr. M. K. Devassy (*Adur*): Sir, the amendment that I propose to move is this:

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"Add the following proviso after the last word of the resolution: 'Provided that the resolution shall be put into operation as per the rules to be passed by the Cochin Legislative Council'."

My object in moving this amendment is this. As the hon'ble member for medicine was remarking, no man will oppose the principle contained in this resolution. But we shall not permit ourselves to be defeated by placing the magic lantern show of the principle before us and playing a different game as per the rules which you propose to bring behind the House. That is the only purpose of this amendment. Now the question that I put to the treasury bench to make the position of the Government clear with regard to bringing Government servants under the purview of this resolution was put with a definite purpose, namely, unless Government servants are included and are made themselves amenable to the principle contained in the resolution the Government may take it that we are going to oppose the resolution in toto. We do not want a caste system among the rich. When you say that you and I are rich, I cannot understand why when the Government officer's salary represents 16 annas in the rupee as much as another man's 16 annas they should be spared. As long as this conception prevails this sort of tricks whereby the legislature is defeated cannot be permitted. I also find that not only this particular matter but there are other matters too that should be incorporated in the rules. This resolution by itself, separate from the rules, is nothing. But the resolution will change its colour, the angel will become a demon, when the rules are brought into operation. Therefore unless the rules are also placed before the House, unless the sense of the House is ascertained before the rules are brought into force, I do not think that we can support the resolution. I therefore propose to move this amendment.

Mr. P. Govinda Menon (*Mulakunnathukavu*): I second the amendment.

Mr. M. Sivarama Menon (*Ernakulam*): I support it.

Mr. A. V. Moothedan (*Chalakkudi*): Sir, I support the broad principle underlying the resolution. I am sorry to oppose the hon'ble the lady member's amendment. There will be no net income at all. Anybody can prepare his own balance sheet showing no net income. Then the very object of the resolution will be defeated. I support the amendment of the hon'ble member for Adur. As I submitted before I accept the broad principle of the resolution. I have very serious objections regarding two or three points mentioned in the note circulated among us. My first objection is regarding payment by out-patients. In

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Madras Presidency there is no such system. There is no necessity to tax the out-patients. That is my first objection. The second is regarding Government servants. There is absolutely no necessity for exempting Government servants. They are just like ourselves.

Mr. P. Govinda Menon (*Mulakunnathukavu*): No. They are better off.

Mr. A. V. Moothedan (*Chalakkudi*): Yes. Then regarding the operation charges—I think these charges are very high. These are some of the suggestions I have to make for Government's consideration.

Mr. T. V. Subramania Ayyar (*Nemmara*): One more suggestion I have to make is that Government may be pleased to state specifically that the funds so derived will not be utilised for any other purpose and that it will be ear-marked for medical relief only.

Mr. K. S. Panicker (*Ezhuvas-Mukundapuram*): On a point of information, Sir.

ഇപ്പോൾ ഈ റസല്യൂഷനിൽ ഓരോ രോഗിയും പണം കൊടുക്കേണ്ടകാര്യം മാത്രം പറഞ്ഞിട്ടുണ്ട്. ഡാക്ടർമാർക്ക് കൊടുക്കുന്നതു ഇതിൽപെടുമോ, അതോ അവർക്ക് വേറെ കൊടുക്കേണ്ടിവരുമോ?

Mr. M. L. Joseph (*Latin Christians-Cranganur*): Mr. President Sir, while I rise to support the general principle contained in the motion I cannot but be in one with my hon'ble friend Mr. Devassy to say that Government officers should not be exempted from the levy of this tax. For as a matter of fact it is the Government servants that can be supposed to have any fixed income at all. Cochin being an agricultural country and the population being mainly agriculturists, the only class of people who can boast of having any steady income is the Government servants and if the income of an agriculturist to-day is calculated, over 90 per cent of the Cochin population will be found to be indebted to its breaking point with the result that when we take into consideration the total income of the man, what we find as a balance after reducing the liabilities he has to meet, the heavy burden of the family and so many other things which he has to see to—is zero. It is but just under such circumstances that the Government servants who do not form themselves as a separate class in the social order should also be included along with the other poor agriculturists of Cochin on whose labour they are fed. When I go through this Appendix I am also afraid as Mr. Devassy remarked whether this resolution is going to work havoc in the garb of an angel.

Mr. V. K. Krishnankutty (*Ezhuvas-Trichur*): Are we on the amendment or on the resolution?

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Mr. Deputy President: We are on both

Mr. M. L. Joseph (*Latin Christians-Cranganur*): I am afraid whether the Chief Medical Officer is not trying to put a bait to his subordinates and thereby make himself more popular at least by the time he retires from service (*Laughter*), because he says in clause 6 that "the Medical Officer in charge of the institution is authorised to decide whether a patient is well-to-do or not. In disputed cases the decision of the Chief Medical Officer shall be final." Surely this is a clause intended to give a source of additional revenue to the medical officer. Hitherto it has been the custom to find out whether one is rich or poor through the revenue officers. Now the Chief Medical Officer is going astray from the principles already laid down and is now trying to make his subordinates authorities to decide whether a man is rich or not. I may also add that these medical officers having no idea of the financial position of Cochin are going to sit in judgment over the wealth of the Cochin subjects. If that clause is retained it cannot but be a source of additional revenue to the medical staff. Moreover the Chief Medical Officer stated that this system of charging the rich began with the starting of the X-ray system. If that is so I am inclined to affirm my former statement that it is only to add to the revenue of the medical staff. What do we find in the X-ray Department? Where do all the money collected there go? All to the pockets of men working in the X-ray Department. If I were permitted to say so, I would even say that apart from other Government servants these medical officers must be charged double. (*Laughter*). Because as long as the medical officers are allowed private practice they are making more than their monthly salary by outside practice. So they must as a class, be separately considered from all the rest of the Government servants, and charged double. (*Laughter*). Also one word with regard to operations. I am not very much in favour of charging for operation, at least such operations which become absolutely necessary for the saving of one's life. There may be cases in which there may not be time enough to wait for one to go and fetch money. Operations may have to be done immediately. If these doctors insist upon ready payment of 50 or 100 rupees, perhaps by the time the money reaches the patient he may not have a chance of undergoing the operation. So my humble submission is, if this resolution is to be passed, supported by this Appendix, I would oppose it with all vehimence at my command. On the contrary if this House is given the freedom to make rules for the charging I would support the broad principles underlying the resolution.

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മിസ്റ്റർ കെ. അയ്യപ്പൻ: സർ, മിസ്റ്റർ ദേവസ്സിയുടെ ഭേദഗതിയെ ഞാനും അനുകൂലിക്കുന്നു. ഈ ഭേദഗതിയെ സംബന്ധിച്ചുള്ള ഗവൺമെൻറിൻെറ നില അറിഞ്ഞാൽ ഈ പ്രമേയത്തെ അനുകൂലിക്കുന്നതിൽ കുഴപ്പം ഉണ്ടാകയില്ല. ഈ ഭേദഗതി ഗവൺമെൻറ് സ്വീകരിക്കുന്നില്ലെങ്കിൽ ഗവൺമെൻറിൻെറ ഈ പ്രമേയത്തെ ഞങ്ങൾക്കു എതിർക്കേണ്ടിവരും. ഈ പ്രമേയത്തിൻെറ തത്വം ഞങ്ങൾ സമ്മതിക്കുന്നു.

ഗവൺമെൻറ് സപ്ലൻറ് സിനെ സംബന്ധിച്ചു് പറകയാണെങ്കിൽ അവരെ ഇതിൽനിന്നു് ഒഴിവാക്കണ്ട എന്നു് ഗവൺമെൻറ് മെമ്പർമാരും സമ്മതിക്കും. ഒരു ബഹുമാനപ്പെട്ട മെമ്പർ പറഞ്ഞതുപോലെ ഈ ഓപ്പറേഷനു പണംവെച്ചിരിക്കുന്നതു് വളരെ ആലോചനകൂടാതെ ചെയ്തതാണു്. ഗവൺമെൻറിൻെറ ഈ രൂപം മാറണം. ഇതിൻെറ പ്രിൻസിപ്പിളിനെ ഈ ഹൌസു അനുകൂലിച്ചിട്ടുണ്ടു്. അതുകൊണ്ടു് ഈവക സംഗതികളിൽ ഗവൺമെൻറിൻെറ നില എന്തെന്നു പറഞ്ഞാൽകൊള്ളാം.

പിന്നെ റോയൽ ഫാമലിയെസംബന്ധിച്ചു പറയുക ആണെങ്കിൽ അതു് ഏതുരീത്തിൽ പറയുന്നുവൊ ആ അർത്ഥത്തിൽ മാത്രമെ എടുത്തുകൂട്ടു. അതായതു് റോയൽഫാമലിയുടെ മരുമക്കൾവഴിയുള്ള ആളുകൾ ആയിരിക്കണം. മക്കൾവഴി വരരുതു്. അതുകൊണ്ടു് ഈവക വിഷമങ്ങൾ ഗവൺമെണ്ടു് തീർത്തുതരേണ്ടതാണു്. അല്ലെങ്കിൽ ഞങ്ങൾ എല്ലാവരും ഇതിനെ എതിർക്കേണ്ടിവരും.

ഒരു സംഗതികൂടി എനിക്കു പറവാനുണ്ടു്. വരവു ഫോറക്കയിൽ കൂടുതൽ എന്നായതുകൊണ്ടു് നാം ഉദ്ദേശിക്കുന്ന ഫലം ഉണ്ടാകയില്ല. അതുകൊണ്ടു് ഫോറക്കയിൽ കൂടുതൽ ആക്കുവാൻ പാടില്ല. ഇതു എന്നും വരുന്ന ഒരു ചിലവല്ല. വല്ലപ്പോഴുമൊരു ഈ ചിലവു് വേണ്ടിവരികയുള്ളു. പണം ഉണ്ടാകണമെങ്കിൽ ഫോറക്കയിൽ കൂടാൻ പാടില്ല. മദ്രാസിലും, ബറോഡായിലുംമറ്റും ഈ സിസ്റ്റം നടപ്പാക്കിയിട്ടുണ്ടു് എന്നു പറഞ്ഞു. അവിടങ്ങളിൽ എത്ര രൂപാവീതം ഈവകയിൽ കിട്ടിയിട്ടുണ്ടു് എന്നറിഞ്ഞാൽ കൊള്ളാം. കാര്യമായ വരവു് ഒന്നും ഇതുകൊണ്ടു് ലഭിക്കുകയില്ലെന്നവന്നാൽ ഈ തർക്കവും തകരാറും കൂടാതെ കഴിക്കുമായിരുന്നു. നല്ല ഒരു വരവു് ഇതിൽനിന്നു കിട്ടുമെങ്കിൽ തീർച്ചയായും അതു ഇവിടെ നടപ്പാക്കണം. ഇതിനെസംബന്ധിച്ചു് നൂം പാസാക്കുവാനുള്ള അധികാരം ഈ ഹൌസിനു തരികയും വേണം. അതുകൊണ്ടു് മിസ്റ്റർ ദേവസ്സിയുടെ ഭേദഗതിയെ ഞാൻ അനുകൂലിക്കുന്നു.

Mr. J. H. Walmseley (*Nominated-Europeans*): Sir, It seems to me that we are clouding the issue. The broad principle put forward by the Chief Medical Officer appears to be approved by every one. I think it will be unfortunate if the resolution was lost because it is being clouded by other influences concerning payments by Government servants. It seems to me that the greatest thing brought out against the resolution is that the Government officers are going to be scot-free. I ask for information on this point: Am I right in saying that all the Government servants are serving under certain terms of appointments? I think I am right also in saying that that agreement includes free medical attendance.

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Mr. P. Govinda Menon (*Mulakunnathukavu*): There is no agreement.

Mr. K. P. Kannan Nayar (*Secretary to Government*): Under the Standing Orders Government officers are entitled to free medical attendance.

Mr. J. H. Walmseley (*Nominated-Europeans*): If it is a matter of right and if it is embodied in the terms of appointment, certainly it is not right that the Government should take away that right from the Government officers. I am in entire agreement with the Chief Medical Officer including his last remarks.

മിസ്റ്റർ സി. ആർ. ഇയ്യുണ്ണി: സർ, എനിക്ക് ഈ വിഷയത്തെ സംബന്ധിച്ച് അധികമൊന്നും പറയാൻ ഇല്ലാ. ഞങ്ങളിൽ ഇരുപക്ഷക്കാരുടേയും അഭിപ്രായം ഇന്നതാണെന്ന ഇവിടെ തുറന്ന പ്രസ്ഥാവിച്ചുകഴിഞ്ഞു. ഈ പ്രമേയത്തിന്റെ അടിസ്ഥാനതത്വത്തെപറ്റി ഞങ്ങൾക്ക് യാതൊരു ശ്രുക്ഷേപവും ഇല്ല. ലേഡിമെമ്പർ കൊണ്ടുവന്ന അമെൻറ്മെൻറിനെ സ്വീകരിക്കുന്നതിൽ പലെ വിഷമങ്ങളും ഉണ്ട് എന്നു പറയേണ്ടിവന്നതിൽ വ്യസനിക്കുന്നു. ഓരോരുത്തരുടേയും നൊറ് ഇൻകം അനുസരിച്ച് ചാർജ്ജ് വസൂലാക്കണം എന്നുള്ള ഈ അമെൻറ്മെൻറിനെ അനുകൂലിക്കാൻ വളരെ പ്രയാസം തോന്നുന്നു.

മിസ്സിസ്സ് തങ്കമ്മ എൻ. മേനോൻ. എന്റെ അമെൻറ്മെൻറിന്റെ പ്രിൻസിപ്പിൾ അതല്ല. കുട്ടികളും പ്രായമുള്ളവരും ഇതു ബാധിക്കാതിരിപ്പാൻവേണ്ടി ആണ് ഞാൻ അങ്ങിനെ പറഞ്ഞിട്ടുള്ളത്.

മിസ്റ്റർ സി. ആർ. ഇയ്യുണ്ണി: ഈ പ്രമേയത്തിന്റെ തത്വത്തെ ഞങ്ങൾ എതുക്കുന്നില്ല. ഈ നോട്ടും റിസല്യൂഷനും കാണുമ്പോൾ ഇതു രണ്ടും ഒന്നിച്ച് പോകുമോ എന്നുള്ളതാണ് ഞങ്ങൾക്ക് സംശയം. അങ്ങിനെ അണെങ്കിൽ അതിനെ എതുക്കാതിരിപ്പാൻ നിവൃത്തി ഇല്ല. ഒരു സംഗതി കൂടി അറിഞ്ഞാൽ കൊള്ളാം. അതായത് "Well-to-do person" means a person, who is in receipt of an annual income of Rs. 1,200 or more or who is a member of the family of such a person and actually dependant on him". എന്നു ഈ നോട്ടിൽ പറഞ്ഞിരിക്കുന്നു. ഇതിനു ശരിയായ യാതൊരു വ്യാഖ്യാനവും പറയുന്നില്ല. ആദായനികുതി കൊടുക്കുന്നവർ, മുനിസിപ്പൽ നികുതി കൊടുക്കുന്നവർ, പ്രൊഫഷൻ ടാക്സ് കൊടുക്കുന്ന ആളുകൾ, ഇവർ ഒക്കെ ഇതിൽ ഉൾപ്പെട്ടുമോ എന്നു വ്യക്തമാകുന്നില്ല. എന്നതന്നെയല്ല ഈ ഫ,ഫ ാ ക. ഒരാൾക്ക വരവുണ്ടോ എന്നു തീരുമാനിക്കുവാൻ മെഡിക്കൽ ആഫീസറോട് പറയുകയാണെങ്കിൽ അതിലും വളരെ വിഷമമുണ്ടാക്കുവാൻ സാധിക്കും. അപ്പീലുണ്ടെങ്കിൽ അതു ചീഫ് മെഡിക്കലാപ്പീസരുടെ അടുത്തുമാണ്. ഒരാൾ well-to-do person ആണെന്നു പറയുവാൻ ചീഫ് മെഡിക്കലാപ്പീസർക്കു സാധ്യമല്ല. ഇതിനെല്ലാം വ്യവസ്ഥിതമായ ഒരു വ്യവസ്ഥവെക്കണം. ഇന്നയിന്ന ആളുകളിൽ നിന്നു സംഖ്യ വസൂലാക്കണമെന്നുള്ള ഒരു നിശ്ചിത പദ്ധതിയിൽ കൂടി പോയാൽ മാത്രമേ ഇന്നയിന്ന ആളുകൾക്ക് ഇത്രയിത്ര സംഖ്യ കൊടുക്കേണ്ടിവരുമെന്നു മനസ്സിലാക്കാൻ നിവൃത്തിയുള്ളു.

പിന്നെ റോയൽ ഫാമിലിയിലുള്ള ആളുകളെപ്പറ്റിയാണെങ്കിൽ അവരെ ഇതിൽ നിന്നും ഒഴിവാക്കുന്നതിൽ ആക്ഷേപം അഭിപ്രായവ്യത്യാസമില്ല. പക്ഷേ

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അതും ശരിക്കു പറയണം. "പ്രിൻസസ്സ്" അല്ലെങ്കിൽ "പ്രിൻസസ്സസ്" എന്നു വ്യക്തമായ അർത്ഥം വരത്തക്കവിധത്തിൽ പറയണം.

മദിരാശിയിൽ ഇല്ലാത്ത പല സംഗതികളും ഇതിൽ കാണുന്നുണ്ട്. ഓപ്പറേഷനു് അവിടെ ചാർജ്ജു് ഇല്ല.

ഡോക്ടർ ഡി. രാഘവേന്ദ്രറാവു: അവിടെ ഔട്ട് പേഷ്യൻസിനു് കൊടുക്കണം.

മിസ്റ്റർ സി. ആർ. ഇയ്യുണ്ണി: ഇതിനെ സംബന്ധിച്ചു് അധികം പറയണമെന്നു് ഞാൻ വിചാരിക്കുന്നില്ല. ഗവൺമെൻറിന്റെ അഭിപ്രായം അറിഞ്ഞതിനുശേഷം വേണ്ടതു പറയാമെന്നാണു് ഞാൻ വിചാരിക്കുന്നതു്. ഗവൺമെൻറു് ഈ ഭേദഗതിയെ അനുകൂലിക്കയാണെങ്കിൽ പിന്നെ പ്രസംഗിക്കേണ്ട കാര്യമില്ല.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Charges are now being levied from the out-patients in Madras.

Mr. C. R. Iyyunni (*Trichur-South*): In the Appendix it is stated that "no charges will be levied from any one in the out-patient department." I do not know whether the Chief Medical Officer is in the wrong or I am in the wrong.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): That is according to the old rules. Now the rules have been revised recently by Dr. T. S. S. Rajan.

മിസ്റ്റർ കെ. എസ്സ്. പണിക്കർ: സർ, ഈ അമെൻറുമെൻറിനെപ്പറ്റി ഗവൺമെൻറിന്റെ പൊസിഷൻ എന്താണെന്നു് ഒന്നു ക്ലിയർ ചെയ്യാൽ കൊള്ളാം. വെറുതെ സമയം കളഞ്ഞിട്ടു കാര്യമില്ല.

Mr. L. M. Pylee (*Latin Christians-Ernakulam*): Sir, I wish to make just one or two observations on this matter. In spite of the confusion that has been made by the Appendix, I think it was a very good thing in giving us that Appendix, because it gives us a foretaste of what is going to come. Suppose the Appendix has not been before us, probably, we would have looked up the resolution itself as an innocent matter, and the hon'ble member for Adur may not have thought of introducing this amendment. It is because we have thought of what was coming that we had to be on our guard. Therefore I think the Chief Medical Officer has to be thanked for giving us an idea of what is contemplated by the resolution. So I heartily support the amendment of Mr. Devassy that the rules must be framed by the House. It must not be made behind the Council, some of these rules themselves are most obnoxious. The idea of exempting the Government servants is an old old relic of antiquity and it must be abolished. It is a very antiquarian notion. Government servants should not be a privileged class hereafter. We are following democratic ideals. We have reformed our constitution on democratic lines. I do not see any reason why that

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old antiquated relic should be retained any more. Another, perhaps less obnoxious, feature of the resolution is that the Doctor must have a peculiar sort of stethoscope to judge about the income of a patient that is going to him for treatment. No scientist has yet invented that instrument. It will be very very unsafe to leave such decisions in the hands of the Doctors. To me it seems that these rules will lead to various practical difficulties. However, if this amendment is accepted by this House, later on when the rules are to be framed we can discuss the details. I therefore appeal to the Government to consider the position and let not the resolution be wrecked by adhering to the rules that are now put forward. I appeal to the members of the Government to see that the amendment moved by Mr. Devassy is accepted.

Mr. P. Govinda Menon (*Mulakunnathukavu*): Sir, I move for closure.

Mr. K. Ayyappan (*Ezhuvas-Kanayannur*) : I second it.

The motion was put and carried.

Mr. K. P. Kannan Nayar (*Secretary to Government*): Sir, the amendment has been given with such short notice that it is not possible for me now to give a definite opinion as to the attitude which the Government is going to take. But I may say one thing. The amendment runs thus: "Provided that the resolution shall be put into operation as per the rules to be passed by the Cochin Legislative Council." A resolution after all, is nothing but a recommendation to the Government whether it comes from a Government member or from a non-official member. We may take it that the Government is going to accept the resolution as it is moved by the Government member representing medicine. In the case of enactments passed by the Legislative Council hon'ble members are aware that there is generally power under one section or other reserved with the Government to frame rules to carry out the provisions of that enactment and in the case of many enactments, rules so framed are placed on the Council table also. I have not come across any instance of a provision in any enactment where the power to frame the rules is given to the Council. It is not because the Government does not want to take the Council into its confidence, but it is only on account of the practical difficulties in working out the provisions of enactments that power to frame rules is not given to the Legislative Council. From the proposed rules you will find that so many things are mentioned there. How are we

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going to have the rules framed by the Council under such circumstances? It is only the practical difficulty that stands in the way of Government accepting the amedment. If this amendment is proposed for the reason that there is a provision in the rules that Government servants should be exempted, my answer is simple. Suppose there is not that provision there. In the Standing Orders, there is a stipulation that medical attendance will be free so far as Government servants are concerned. So long as that Standing Order is there, the question might arise whether it will be possible to change it by simply changing or adding a rule in this manner.

Mr. A. V. Moothedan (*Chalakkudi*) : You can amend the Standing Orders.

Mr. K. P. Kannan Nayar (*Secretary to Government*) : That is a different matter.

So long as that Standing Order remains as it is, Government servants will claim the right to have free medical attendance.

Mr. C. R. Iyyunni (*Trichur-South*) : On a point of information, Sir, is it necessary that if one of provisions of the Standing Orders which deals with service is to be changed a person in Government service should be consulted ?

Mr. K. P. Kannan Nayar (*Secretary to Government*): So far as that matter is concerned there are certain provisions relating to service. And it is on the faith of those provisions that a particular man enters the service. There are certain Standing Orders which gives certain rights or certain privileges. It is under these conditions that one is entertained in the service.

Mr. T. V. Subramania Ayyar (*Nemmara*) : On this principle even retrenchment can be opposed.

Mr. K. P. Kannan Nayar (*Secretary to Government*) : It can be opposed. That is why I said that I do not want to give a definite opinion so far as that matter is concerned. I am only pointing out the facts. So far as that rule in the Standing Orders remains, we have to give thought to the question whether the rule here should not also reconcile with the Standing Order. With regard to the practicability of the rules themselves it will be always open to this House to bring in a resolution to have a particular rule changed, if it is considered objectionable. But to have all the rules placed before the House for acceptance is an impracticable proposition. Therefore considering the practicability of the matter Government are not in a position to accept this amendment.

Mr. C. R. Iyyunni (*Trichur-South*) : May I suggest a course? Now the hon'ble member says that the

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Government have not been in a position to think over the matter. If the resolution is to be taken tomorrow and voted upon I do not think the House will have any objection.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Sir, the idea of starting this system came from the members of the Legislative Council themselves, and the Government order on that resolution of the Committee is to place their view before this House in the shape of a resolution to be moved by me. As regards the rules framed, it is only a combination of the rules that exist in Mysore, Baroda and Madras. It may be that Madras may not be charging for one or that Baroda may not be charging for another. We have gone through the rules in force in all these three places and the rates and rules framed by us were according to the rules promulgated in Mysore, Madras and Baroda. Under the rules in Madras, all Government officers are entitled for free medical attendance. Similarly in the rules of Mysore and Baroda all Government servants are exempted from the levy of these charges. The idea is that all hospitals are maintained by Government and these servants of the Government should be given free medical aid.

Mr. A. V. Moothedan (*Chalakkudi*): What about the public?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): That is a debatable point. Arguments for and against can be advanced. As regards the charging of fees, whether the suggested rates are more or less than they ought to be, is a matter that can be decided by the Government after knowing the views of the Council. We do not want to force these rules upon the people. These rules have been, unlike in ordinary instances, placed before you for a very long time before the resolution is actually moved in this Council. Government does not want to force the issue, to force it into the throat of the people without the consent of the Legislative Council. What we want to do is to watch the discussion in the Council and then come to a definite decision on the various points that have to be incorporated in the rules. Therefore I wish that the hon'ble members will not run away with the impression that Government wish to enforce this in toto. The very order of the Government is to move the resolution and to see how the House views it, and then, though certain rules have been framed, Government will consider all the points raised during the discussion of the resolution and necessary amendments will be made in the rules in the light of the discussion that has taken place here. There is no doubt, a point has been raised by many of the members here regarding the exclusion of Government servants. At present Government servants' families

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are included. Government servants themselves alone are exempted. That is a point that will also be considered by the Government.

Then there has been a criticism that medical officers receive bribes or illegal gratification from the public. The rules as regards X-rays which were brought specially when the X-ray Department was started in the General Hospital, Ernakulam, were the same as those existing in the X-ray Department of the Government of Madras. Out of the income—derived from this source half goes to the Government for the maintenance of the Institution as well as the X-ray apparatus and the necessary chemicals. The other half is divided among the staff of the X-ray Department, because, unlike in other Departments no special allowance is given to the X-ray men for the special dangers and risks that they are subjected to in operating the X-ray apparatus. After all what are they getting? The extra remuneration does not come to so much as described here. Once in a quarter the whole staff gets only about Rs. 150—200. On the whole the X-ray staff gets about Rs. 800—900 during a year. From that you can imagine how much they get for the extra risk they have to undergo. There are instances where people had to lose their fingers and disfigure their faces on account of the operations of the X-ray apparatus. It is just to meet this extra risk that they are given this allowance that is derived from the well-to-do classes. Government do not pay them any extra allowance for doing these things. Then, as regards the charge that was levelled against the medical men in general, I know the same charge were levelled during the budget session. I had occasion to write to some of the hon'ble members who brought such allegations, but I am sorry to say that no one was able to substantiate a single charge.

Mr. A. V. Moothedan (*Chalakkudi*): I question that statement.

Mrs. A. N. Menon's amendment was put and lost.

Mr. M. K. Devassy's amendment was put and carried.

The resolution as amended was put and carried.

NON-OFFICIAL RESOLUTIONS.

1. Abolition of the post of the Magistrate in Chittur.

Mr. A. Eachara Menon (*Chittur-Rural*): Sir, my resolution runs thus: "*This Council recommends to the Government to give the Munsiff of Chittur second-class powers of Magistrate and abolish the post of the Magistrate there.*"

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